

## IN THE \_\_\_\_\_\_, MISSOUR Affidavit of Changes in Circumstance and Motion to Modify Judgment/Full Order of Protection - Child , MISSOURI

Use this form when six to ten children are involved with this case. Use CP50 for one child and CP56 for two to five children.

Judge or Division:	Case Number:		
	Court ORI Number:		
Petitioner:	MSHP Number:		
	Responsible Law Enforcement ORI:		
Protected Child 1:	Related Cases:	(Date File Stamp)	
Age of Protected Child:	Protected Child's Relationship to Respondent p	ursuant to 18 U.S.C.	
Sex: F M Race:	§§ 921(a)(32) and 922(g)(8) determination:		
Protected Child 2:	Protected Child's Relationship to Respondent (Chil	d 1):	
Age of Protected Child:	☐ Child ☐ Step-Child or Former Ste		
Sex: F M Race:	Parent is Unmarried, Intimate Residing/Resided	with Respondent	
Protected Child 3:	Other (specify)		
Age of Protected Child:	Protected Child's Relationship to Respondent (Chil	d 2):	
Sex: F M Race:	☐ Child ☐ Step-Child or Former Ste		
Protected Child 4:	Parent is Unmarried, Intimate Residing/Resided	with Respondent	
Age of Protected Child:	Other (specify)		
Sex:  F M Race:	Protected Child's Relationship to Respondent (Child 3):		
Protected Child 5:	☐ Child ☐ Step-Child or Former Ste		
Age of Protected Child:	Parent is Unmarried, Intimate Residing/Resided	with Respondent	
Sex:  F M Race:	Other (specify)		
Protected Child 6:	Protected Child's Relationship to Respondent (Child 4):		
Age of Protected Child:	☐ Child ☐ Step-Child or Former Ste		
Sex: F M Race: Protected Child 7:	Parent is Unmarried, Intimate Residing/Resided	with Respondent	
Age of Protected Child:	Other (specify)	>	
Sex: F M Race:	Protected Child's Relationship to Respondent (Chil		
Protected Child 8:	☐ Child ☐ Step-Child or Former Ste☐ Parent is Unmarried, Intimate Residing/Resided		
Age of Protected Child:	Other (specify)	with respondent	
Sex: F M Race:		d c).	
Protected Child 9:	Protected Child's Relationship to Respondent (Chill Child Step-Child or Former Ste		
Age of Protected Child:	Parent is Unmarried, Intimate Residing/Resided		
Sex:  F M Race:	Other (specify)		
Protected Child 10:	Protected Child's Relationship to Respondent (Chil	d 7):	
Age of Protected Child:	☐ Child ☐ Step-Child or Former Ste		
Sex:  F M Race:	Parent is Unmarried, Intimate Residing/Resided		
	Other (specify)		
	Protected Child's Relationship to Respondent (Chil	d 8):	
VS.	☐ Child ☐ Step-Child or Former Ste		
Respondent:	Parent is Unmarried, Intimate Residing/Resided	with Respondent	
	Other (specify)		
Alias/Nicknames:	Protected Child's Relationship to Respondent (Chil		
Respondent's DOB:	Child Step-Child or Former Ste		
SSN (if known, last four digits):	Parent is Unmarried, Intimate Residing/Resided Other (specify)	with Respondent	
Race: Sex: $\square$ F $\square$ M			
	Protected Child's Relationship to Respondent (Chil		
	☐ Child ☐ Step-Child or Former Ste		
	Other (specify)	with Respondent	
	Respondent's Home Address:		
	Home Phone Number:		
	Respondent's Work Address:		
	Work Phone Number:		
	Work Hours:		

A Judgment/Full Order of Child Protection was entered in		(Count	y/City of	
St. Louis), Missouri, o	n	(date).		
necessary to serve th	ed in the circumstances of the child ne best interests of the child(ren). I andent	Below are the spec	ific facts, including dates and time	s, which
(check the box that ap	. ,			
☐ Installments of ma ☐ Custody. ☐ Visitation. ☐ Other (specify):	intenance or support.		s regarding communication. s regarding contact.	
The specific modificat	ion that I am requesting is:			
I swear /affirm under <sub>I</sub>	penalty of perjury that these facts a	are true according	to my best knowledge and belief.	
	Date		Your Signature	
NOTICE: Section 455.510.3, RSMo, provides that a Petitioner seeking protection under the Child Protection Orders Act is not required to reveal any current address or place of residence of the child(ren) on this petition. Do not provide this information if doing so will endanger the child(ren).		,	Your Street Address	
		City	State	Zip
			Your Telephone Number	
In witness thereof:				
Dat	е		Clerk Witnessing Signature	
	Subscribed and sworn to bef	ore me on this		(date).
(Seal)	My commission expires:	Date	Notary Public	
This affidavit must be o	Directions fo completed and signature witnes	-	rk or notary before filing it with	the court.

OSCA (02-16) CP53 2 of 2 455.528, 455.528, 455.530 RSMo